

3-4. The Office Action rejected each of claims 1, 3-5, 14 and 16-18 as obvious over Gray in view of Gralla and further in view of Coli. Applicant strongly traverses this rejection.

Claim 1 requires, among other things, a viewer including a web browser and a separate active guidelines interpreter wherein the interpreter receives active guidelines tags and converts the tags into hyperlinks which are passed on to the web browser and the browser receives the hyperlinks from the interpreter and displays the hyperlinks.

The distinction between the interpreter and the browser is important in the present application. To this end the present specification teaches that a conventional browser and the separate claimed interpreter treat active guidelines tags differently. In this regard, see page 5, line 24 through page 6, line 16 where it is taught that a conventional browser that does not include an interpreter cannot alone create a hyperlink using an active guideline tag while the claimed interpreter, as the label implies, interprets the tag and creates a hyperlink which can then be displayed by the browser. More specifically see the first and second examples at the bottom of page 5 and the top of page 6 that represent the browser view and the browser with interpreter view of the same active guideline tag, respectively, where the browser view at the bottom of page 5 does not include an "Order" hyperlink while the browser with interpreter view at the top of page 6 includes the "Order" hyperlink. Here, the idea is that some computing systems may be equipped to use the active guideline tags while other systems may not be equipped to use the tags and, where a system is not equipped to use the tags, a conventional browser should still be usable to access the clinical guidelines despite the fact that the hyperlinks associated with active guideline tags are not available.

Thus, as taught by the present specification, an active guideline tag is not interpretable by a conventional browser and an interpreter is required to interpret the tag and generate a hyperlink which is then usable by a browser.

Turning to the cited prior art, none of the prior art references cited teaches or suggests a system that includes an interpreter as well as a separate browser. To this end, the Examiner only cited Gralla as teaching an interpreter and a browser. Upon another perusal of Gralla, Gralla only teaches a conventional browser and fails to teach or suggest an interpreter that can interpret an active guideline tag. Consistent with this understanding of Gralla, the Examiner indicates in the most recent Office Action that the browser in Gralla performs the steps of both an interpreter and a conventional browser (see the last subparagraph on page 3 of the most recent Office Action where the Examiner indicates that the web browser is the active guideline interpreter). Thus, Gralla fails to teach or suggest an interpreter in addition to a browser.

Turning to Grey and Coli, neither of those references teaches or suggests a viewer that includes an interpreter that is separate from a browser. Because none of the references cited teaches or contemplates an interpreter that is separate from a browser where the interpreter uses active guideline tags to generate a hyperlink which is then provided to the browser for display, when combined, the references cannot possibly teach the claim 1 limitations and Applicant requests that the Examiner withdraw the rejection of claim 1 and claims that depend there from.

In addition, claim 1 requires a server that maintains clinical guidelines and associated active guideline tags where the tags contain information usable (1) by a browser to generate hyperlinks and (2) by a router to generate action items usable by a patient record system to create an order. Thus, claim 1 requires that the predefined tags be distinct from the clinical guidelines and be usable to generate both a hyperlink and an action item where the action item is usable to create an order.

Turning again to the prior art references, while Grey appears to teach a system that presents a clinical guideline (e.g., an MRI of the brain) and an associated "Acceptance" icon 476 selectable by a user to commence a diagnostic test ordering process (albeit where the order process requires manual entry of additional order specifying information as shown in Figs. 23 and 24), Grey fails to teach the mechanism

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by which a view like that in Fig. 22 is generated. More specifically, Gray does not teach a server that stores clinical guidelines and associated active guideline tags where the tags are usable to create selectable hyperlinks as well as to create action items usable by a patient record system to create orders. The Examiner appears to agree with the Applicant's interpretation of Gray above as the Examiner relied on the Gralla reference to teach HTML concepts related to URLs and associated hyperlinks.

Turning to Gralla, Gralla teaches a conventional browser system wherein conventional tags are stored that can be used by a browser to generate hyperlinks and associated URLs. URLs are simply server addresses and do not include information usable by a patient record system to generate an order. In this regard, when a hyperlink in Gralla is selected, the browser being used simply uses the URL associated with the selected hyperlink to access information associated with the URL. Nothing in Gralla teaches or suggests that information in URLs can be used to generate any type of an order, much less a patient records system order.

For at least this additional reason Applicant believes claim 1 and claims that depend there from are distinct over the art cited and requests that the rejection be withdrawn.

Each of claims 14 and 17 include limitations similar to the limitations of claim 1 including an interpreter that is separate from a browser where the interpreter uses active guideline tags to generate hyperlinks that are presented to the browser for viewing. Here again the browser alone cannot interpret active guideline tags and generate the hyperlink. Applicant believes that each of claims 14 and 17 and the claims that depend there from are patentable over the cited references for the same reasons that claim 1 is patentable and requests allowance of each of those claims.

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Based on the arguments presented herewith, reconsideration of the merits of this application is respectfully requested

Respectfully submitted,  
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Dated: 2-23-07

  
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